PART B - FEE(S) TRANSMITTAL

|   | Nov  | ور 1 2007   | or <u>Fax</u> (  | Mail Stop ISSSE FE<br>Commissioner for Pa<br>No. Box 1450<br>Alexandria, Virginia<br>571)-273-2885   | 22313-1450  |  |
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| INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifical  | form should be used for<br>correspondence including<br>ed below or directed officers                                 | or transmittage the ISSU<br>a the Base advance or<br>Block I, by (a                                     | JE FEE and PUBLICATION of the state of the s | ATION FEE (if required)  If maintenance fees will be Tespondence address; and  | Blocks I through 5 or mailed to the current<br>for (b) indicating a sep   | should be completed where<br>t correspondence address as<br>parate "FEE ADDRESS" for                                   |
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| \^/^^\ = EMETERIO A/  | 1000CE720  |   | [  | Michele A  | . Read  | (Depositor's name)   |
| 02/2007 FMETEKI2 00000088 09965738  |  |   |  | Whele a Read (Signature)   |   |  |
| FC:2501 720.00 OP<br>FC:1504 300.00 OP  |  |   |  | October 3  | 2007  | (Date)   |
| APPLICATION NO.   | FILING DATE  |   | FIRST NAMED INVENT   | OR AT  | TORNEY DOCKET NO.   | CONFIRMATION NO.   |
| 09/965,738  | 09/27/2001   |   | Timothy J. O'Brien   |  | 022438.43865  | 3856   |
| TITLE OF INVENTIONS   | ON: REPEAT SEQUE   | NCES OF THE CAI   | 25 GENE AND TH   | EIR USE FOR DIAG   | NOSTIC AND THER   | CAPEUTIC   |
| APPLN. TYPE   | SMALL ENTITY   | ISSUE FEE DUE   | PUBLICATION FEE DU   | E PREV. PAID ISSUE FE  | TOTAL FEE(S) DUI  | E DATE DUE   |
| nonprovisional  | YES  | -\$790-\$720  | \$300  | \$0  | \$1000  | 11/06/2007   |
| EXAMINER  |  | ART UNIT  | CLASS-SUBCLASS   |  |   |  |
| REDDIG,   | PETER J  | 1642  | 514-012000   | <del></del>  |   |  |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |  |   | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  |  |   |  |
| 3. ASSIGNEE NAME A  | ND RESIDENCE DATA  | TO BE PRINTED ON T  | THE PATENT (print or   | type)  |   |  |
| PLEASE NOTE: Unitecordation as set fort (A) NAME OF ASSIG   | h in 37 CFR 3.11. Compl  | Ted below, no assignee etion of this form is NOT  | l' a substitute for filing   | e patent. If an assignee is<br>an assignment.<br>TY and STATE OR COUT  |   | document has been filed for  |
| The Board of  | Trustees of t  | he University   | of Arkansas  | Little Ro  | ck, Arkansas  |  |
| Please check the appropr  | iate assignee category or o  | categories (will not be pr  | inted on the patent):  | 🗆 Individual 🖾 Corpor  | ation or other private gr   | oup entity Government  |
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| a. Applicant claim  | tus (from status indicated<br>s SMALL ENTITY status  | . See 37 CFR 1.27.  | b. Applicant is no l   | onger claiming SMALL E   | NTITY status. See 37 C  | FR 1.27(g)(2).   |
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| Typed or printed name Hugh McTavish   |  |   | Registration No. 48,341  |  |   |  |
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